



KENT PARKS AND RECREATION DEPARTMENT

2003 – 2004

RECREATION BASKETBALL

START SMART 3 ½ - 4 YEAR OLDS (\$50.00)

HOT SHOT AGES 5 & 6 BOYS AND GIRLS (\$65.00)

PEE WEE AGES 7 & 8 BOYS AND GIRLS (\$65.00)

JUNIOR GIRLS AGES 9 TO 12 (\$90.00)

SENIOR GIRLS 13 TO 17 (\$90.00)

MINOR BOYS AGES 9 & 10 (\$90.00)

JUNIOR BOYS AGES 11 & 12 (\$90.00)

INTERMEDIATE BOYS AGES 13 & 14 (\$100.00)

*SENIOR BOYS 15 & 16 – 17 & 18 (\$100.00)

(*DEPENDS ON REGISTRATION NUMBERS)

REGISTRATION IS ON NOW!!

At The Kent Recreation Office – Monday through Thursday from
9.30AM to 3.00PM

Or mail completed forms to Kent Recreation, 531 Rte 52 Carmel, NY 10512

You may also put completed form and check in the office mail slot 24 hour a day.

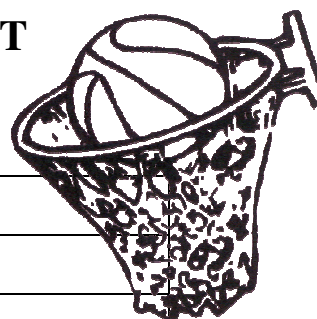
If any additional information is needed please call **LEISURE LINE 845-225-1400**

“YOU MUST REGISTER ON TIME” – WE ARE STARTING EARLIER

GYMS WILL OPEN SOON AND REGISTRATION CLOSSES

NOVEMBER 1st 2003

BASKETBALL CUT OFF DATE FOR EACH PROGRAM IS APRIL 1ST
(BIRTHDAY 2004)



REGISTRATION FORM

NAME _____ AGE _____

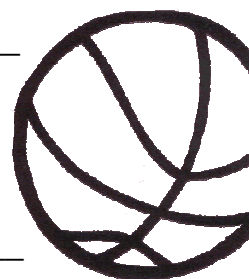
ADDRESS _____ PHONE# _____

DATE OF BIRTH _____ SCHOOL _____

AGE GROUP (SEE ABOVE) _____

INTERESTED IN COACHING (YES OR NO) NEW REGISTRANT (YES OR NO)

TEAM PLAYED ON LAST YEAR _____



*PLEASE NOTE INCREASE IN FEES ARE DUE TO NEW SCHOOL BOARD POLICY AND WE MUST CONTINUE TO PAY FOR USE OF THE SCHOOLS. (EVEN IF BASIC BUDGET PASSES).

THE KENT PARKS AND RECREATION DEPARTMENT WILL INCREASE SUPERVISION IN THE GYMS AND HALLWAYS TO HELP DETER VANDALISM. WE ASK THE COOPERATION OF THE PARTICIPANTS AS WELL AS THE PARENTS TO ASSIST US. THE KENT RECREATION COMMISSION RESERVES THE RIGHT TO CURTAIL PROGRAMS DUE TO PARTICIPANTS MISCONDUCT AND VANDALISM. WE ALL MUST WORK TOGETHER. BY LAW THE KENT PARKS AND RECREATION DEPT. CANNOT AND DOES NOT PROVIDE MEDICAL INSURANCE FOR PARTIFIPANTS IN ITS PROGRAMS.

I HEREBY AUTHORIZE MY SON/DAUGHTER TO PARTICIPATE IN THE ABOVE MENTIONED PROGRAM SPONSORED BY THE KENT RECREATION DEPT. I HEREBY RELEASE THE AGENTS, SERVANTS, AND EMPLOYEES FROM ANY LIABILITY FOR PERSONAL INJURIES OR PROPERTY DAMAGES SUSTAINED BY ME CHILD IN CONNECTION WITH SUCH PARTICIPATION. IN THE EVENT OF INJURY, I AUTHORIZED KENT RECREATION COMMISSION STAFF MEMBER TO TAKE MY CHILD TO THE HOSPITAL FOR TREATMENT AT MY OWN EXPENSE.

SIGNATURE OF PARENT OR GUARDIAN